

Developing Attachments through Theraplay®

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A Theraplay® therapist is holding a disorganized, anxious child in her lap, checking out what a wonderful boy he is. The boy cries until, all of a sudden, the therapist honks the child's nose. The child stops, looks at the therapist and smiles. During another session, the child stops resisting all engaging attempts and is taken by surprise when the therapist blows a bubble which lands on the little boy's hand and his little finger pops it. The therapist matches the child's amazement and asks in delight "What happened?" The child, who has forgotten to resist, begins to pop the bubbles as the therapist and parent match his delight. During the next session, the little boy is suddenly still when in his mother's arms, he becomes absorbed by the eyes of his mom, who attunes to every gesture and vocalization of her little boy. As she plays peek-a-boo with his little feet, she rhymes the child's "mama" into a little tune. Never before in his 4 years, has the child been in prolonged eye contact with his mother, or with anyone else for that matter. He reaches over to grasp his mother's finger as he giggles and looks intently at his mother saying "More Mama, more." This mother says her son was 'born to her' at that moment. (reframed from J. Makela, 2003)

Children with a history of failed attachments usually have developed a variety of problems. 65% to 82% of children who have been in foster care have attachment issues and are missing some key developmental skills necessary to develop secure attachments (Hughes, 1999). Anger, aggression, withdrawal, depression, refusal to follow family rules, and the need to be in control at all times are symptoms which not only worry parents, but cause detriments to healthy social and emotional development.

Children with these issues are difficult to parent. Theraplay® is an exciting therapy which helps to treat many issues children experience today; however it is especially helpful for children with attachment related problems. It is a well-established modality designed to enhance relationships, raise self-esteem, improve trust in others and create joyful interactions between parent and child.

The focus of Theraplay® is based on five essential qualities: Structure, Challenge, Engagement, Nurture and Playfulness (Jernberg & Booth, 1999). These qualities mirror early parent-child relationships which are easily adapted to suit any aged child. Its philosophy is based on the idea of "What would we do for an infant who is behaving this way?" Children with attachment disorders missed out on healthy early parent-child experiences and because of this their emotional development is often hindered and delayed. An attachment disordered 8 year-old could emotionally present as a 3-4 year old child: cries easily, hard to reason with, clingy, demanding. Theraplay helps to address this emotional delay by providing the child with new experiences that often replicate what he would have required as a baby but never had the good fortune to get. Often during Theraplay treatment, the parent is reminded to ask herself "If my child were 4, what response would I expect him to give?" or "If my child were still only 2, would I expect him to be able to calm himself if he were upset?" The answer is often 'No'. Thus, Theraplay® encourages parents to use techniques that they would have used with an infant or young child.

Working closely with parents, the therapist uses attachment-building techniques which help to provide corrective attachment experiences. Using playful methods which focus on Structure and Challenge help to provide the child with experiences and opportunities for success while remaining safe and supported. The fact that the adult is in charge is reassuring to the child. Challenging activities are fun and require a partnership, not done alone. They help

the child take a mild, age appropriate risk and promote feelings of competence and confidence. A simple challenging activity like **Balloon Between Two Bodies** (see description of activities at end of article) can help the child feel competent and confident by encouraging the child to take a slight risk and to accomplish the activity with adult help. Simple structured activities such as the **Bean Bag Game** or **Cotton Ball Hockey** help to relieve the child of the burden of maintaining control of interactions. The adult sets limits, defines body boundaries, keeps the child safe and helps to complete sequences of activities.

Engaging and Nurturing methods provide experiences which accept and love the child unconditionally. Engagement interactions focus on the child in an intensive and personal way in order to make an attuned connection. The goal is that the child feels “seen” and “felt.” In addition to this crucial connection, engaging activities, such as **Body Check-ups**, **Piggy Back Ride** and **Hand Clapping Games** offer pleasant stimulation, variety and a fresh view of life, allowing the child to understand that surprises can be fun and new experiences enjoyable.

Soothing, calming, quieting, caretaking activities that make the world feel safe, predictable, warm and secure and reassure the child that the adult provides comfort and stability are what Nurturing tasks involve. The goal of activities such as **Cotton Ball Touch** and the **Twinkle Song** is to meet the child’s unfulfilled younger needs by reinforcing the message that the child is worthy of care and that the adults will provide care without the child having to ask for it. Through nurturance the child is helped to relax and to be taken care of. The child’s inner representation begins to build and he begins to believe that he is lovable and valued. Children learn what it feels like as interactions are regulated while they experience the joy of having a positive connection with another person.

There is a growing body of research which outlines the positive impact of healthy physical contact on people of all ages. Barnard & Brazelton (1990) and Field (1993) found that loving touch produces oxytocin and releases endogenous opioids, which are known to solidify infant-mother bonds. Many studies have found that withholding touch can be as damaging as inappropriate touch, as was seen in Romanian orphans. It is important that children, especially those with attachment-related issues experience gentle, kind, loving and safe touch. Thus, Theraplay®’s treatment includes many opportunities for healthy touch – whereby the therapist deliberately plans to have the child touched because:

- ♥ Touch is an important modality for creating relationships
- ♥ Touch communicates safety, acceptance, playfulness and empathy
- ♥ Touch helps regulate a child’s out of sync emotions

(The Theraplay® Institute)

The therapist helps the parents learn how to become more attuned to the child’s reactions and to find ways to make touch acceptable.

One of the strongest and most effective components of Theraplay® is its ability to include the parents as a primary component of treatment. Parents are the crucial players because they are with the child 24/7 and because the child needs to learn how to trust and form a healthy relationship with them in order to be able to grow and form future healthy adult relationships. Parents learn how to become Theraplay® experts to their own children through modeling, guiding, discussions, feedback, role-playing and guided practice.

All children need consistent daily doses of warmth, nurturance, acceptance, structure, challenge and playfulness. Enlightened interventions such as Theraplay® can help counteract negative emotions, re-channel past or missing early childhood attachment experiences into more positive ones and give a child the chance of creating a trusting healthy attachment, possibly for the first time in his life (The Theraplay Institute).

The activities listed below are just a few of the simple games which are used during Theraplay® treatment and are not only effective because they are playful, fun and engaging. These and other Theraplay® activities allow for the child to experience special ‘first moments’ between child and parent. Moments where the child realizes he’s not only being ‘seen’ but also thought about, living and having an effect in another’s mind (Makela, 2003) and where the parent is supported in helping the the child to ‘let go’ enough to accept his parents love. These special firsts are what help child and parent begin to build a trusting and enjoyable attachment.

Sample Theraplay® Activities

(referenced from Jernberg & Booth, 1999 & Theraplay Institute)

Bean Bag Game: Place a beanbag or small beany baby toy on your child’s head, give a signal (“when my eye blinks”) or a magic word (“when I say the word ‘bubbles’”) to cue the child to drop the beanbag into your hands (child tilts his head toward you so you can catch the bean bag in your hands). Take turns.

Cotton Ball Hockey: Lie on the floor on your stomach (or sit with a pillow between you holding the pillow up to eye level). Blow cotton balls back and forth trying to get the cotton ball past the child’s nose and past your nose. You can increase the complexity by saying how many blows can be used to get the cotton ball across the pillow, or by both trying to blow at the same time to keep the cotton ball in the middle. You can increase the structure of this game by using magic or cue words to signal when to start or stop. Remember to keep control of the game and don’t allow the child to control it...keep it structured, but successful, fun and positive.

Balloon Between Two Bodies: Hold a balloon between you and the child (such as between foreheads, stomachs, shoulders, elbows) and move across the mat without dropping or popping the balloon. See if you can do this without using hands, but use this opportunity to touch your child in a fun and playful way (ie: wrap your arms around each other to hold on to the balloon between your stomachs).

Body Check-up: Check child’s body parts, such as nose, chin, ears, cheeks, fingers, toes, knees to see if they are warm/cold, hard/soft, wiggly/quiet and so on. Count freckles, toes, fingers and knuckles.

Piggy Back Ride: Help the child get onto your back. Jog around the room with the child on your back. Child can give signals for turning, stopping, changing directions, “Whoa!” and “Giddy-up!”

Hand Clapping Games: Older children enjoy these games very much. They can be simple (Patty Cake) or complex (elaborate rhythmic clapping patterns) and can have a variety of chants, for example, Miss Mary Mack or the Sailor Went to Sea.

Cotton Ball Touch: Have the child close his eyes. Touch your child gently with a cotton ball. Have the child open his eyes and indicate where he was touched.

Twinkle Song: Adapt the words of “Twinkle, Twinkle Little Star” to the special characteristics of the child. “What a special boy you are, Dark brown hair and soft soft cheeks, Bright brown eyes from which you peek, twinkle, twinkle little star, what a special boy you are.” Hold the child in your arms and touch the parts you refer to as you sing and rock him gently.

A bit about the author:

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The Theraplay Institute, Chicago. www.theraplay.org